

Dear Public Health Committee Members,

As a Connecticut parent and business owner, I OPPOSE HB5044 and urge you to VOTE NO to protect religious and medical freedoms in our state.

Firstly, there is no public health emergency in Connecticut and no evidence that one is emerging. Measles is often cited by legislators as one of the primary reasons for the attempted removal of our religious freedom. In 2019, Connecticut had FOUR cases of measles¹, and only one isolated case in a child. 2018 saw three adult cases. In a population of over 3.5 million people, this equates to .0001% of the population who have contracted an illness, recovered, and now have lifelong measles immunity. This hardly qualifies as any reasonable justification to strip people of their human rights. There is no health emergency and there is no reason to remove the religious exemption.

Secondly, an increase in religious exemptions does not equal an increase in illnesses for which vaccines are available. A 25% increase in religious exemptions has been cited as a reason for the attempted removal of our religious freedom. However, a review of Connecticut Department of Public Health data for measles, mumps and rubella cases in Connecticut, alongside the religious exemptions (which have been available since 1959) for kindergarten and third grade students from 2003 to present, show that there is no correlation between increased exemptions and the decline of measles, mumps and rubella². The incidences of these illnesses remain negligible despite increases in exemptions.

It is also very important to remember that healthy children are not a danger to public health. Unvaccinated does not equal diseased, and it does not mean that these children are carriers of any illnesses for which 15 vaccines are available. Indeed, with vaccines only addressing 15 viral and bacterial illnesses (six of which "cannot prevent transmission of disease either because they are not designed to... or because they protect from non-communicable diseases"³), that leaves potential vaccine protection for only nine illnesses. What about the thousands upon thousands of other pathogenic viruses, bacteria, etc, that school children are exposed to on a daily basis? What about all of the unvaccinated adults that have access to the school environment, from teachers and administrators, to parents and other visitors, to support and custodial staff? School was never meant to be a sterile environment.

Section 52-571b of the Connecticut General Statutes states, "The state or any political subdivision of the state may burden a person's exercise of religion only if it demonstrates that application of the burden to the person (1) is in furtherance of a compelling governmental interest, and (2) is the least restrictive means of furthering that compelling governmental interest."⁴ Has the committee considered less invasive measures that will serve the purpose of protecting public health better than vaccinations, without impinging upon religious and medical freedoms, bodily autonomy or consent by proxy? For example, a 2013 study found that "maintaining indoor relative humidity >40% will significantly reduce the infectivity of aerosolized [influenza] virus."⁵ What other "least restrictive means" can schools put in place to protect public health against much more common illnesses?

This bill is predicated on the safety and efficacy of vaccines in protecting public health. However, vaccines are liability-free⁶ products that carry risk of serious injury or death. Through 2/1/2020, the National Vaccine Injury Compensation Program, "VICP", paid out over \$4.3B (\$4B to petitioners) for over 7,000 compensated claims⁷ and as of 12/14/2019, almost

665k reactions have been reported via the CDC's Vaccine Adverse Events Reporting System, "VAERS", with over 6,200 reports being from Connecticut residents⁸.

Moreover, there are ZERO double blind, inert placebo controlled studies, short term AND long term for each individual vaccine and when given in conjunction with CDC standard and catch-up schedules that prove the claims of safety or efficacy. In his testimony at the Connecticut Informational Forum on Public School Immunizations on November 22, 2019, Dr. Lawrence Palevsky stated, "No study exists to actually evaluate the safety of a vaccine compared to a placebo group. None. When vaccines are studied, the maximum amount of days that vaccines are studied are up to 10 days to two weeks."⁹ This is tantamount to medical experimentation on our children. Why doesn't the State of Connecticut demand rigorous studies to validate the claims that vaccines are safe and effective, both short and long term? Who is responsible if a child has an adverse reaction? Will the State be funding medical care for those harmed as a result of this bill? How about a refund of tax dollars paid into a public education system that our children are denied access to?

Above all else, no one should be mandated to accept risk or inject something they do not agree with for themselves or their children. Where there is risk, there must be choice. That is the basis of informed consent, and is a human right. According to the Third Article of the United Nations' Universal Declaration on Bioethics and Human Rights, "the interests and welfare of the individual should have priority over the sole interest of science or society."¹⁰ The first directive of the Nuremberg Code states, "the voluntary consent of the human subject is absolutely essential."¹¹ The Erlanger Medical Ethics Orientation Manual requires informed consent "be free from coercion or undue influence."¹² Vaccine mandates invalidate informed consent and impinge upon our religious and medical freedom. Connecticut residents should ALWAYS have a choice regarding medical and religious decisions for themselves and their families. One can be a proponent of both immunizations AND religious freedom; the two do not need to be (nor should they be) mutually exclusive.

For these reasons, and many, many more, I urge you to OPPOSE HB5044 and keep healthy children in school where they belong.

Respectfully,

Jennifer Bath
Danbury, CT

1 <https://portal.ct.gov/DPH/Press-Room/Press-Releases---2019/DPH-Confirms-4th-Case-of-Measles-in-CT-for-2019>

2 <https://www.activecitizenryusa.com/exemptions-vs-outbreaks.html>

3 <https://zerovaxx.com/wp-content/uploads/2019/12/Letter-to-Legislatures-Considering-Vaccine-Legislation-Obukhanych.pdf>

4 https://www.cga.ct.gov/current/pub/chap_925.htm - sec 52-571b

5 <https://www.cdc.gov/niosh/nioshtic-2/20042261.html>

6 <https://www.law.cornell.edu/uscode/text/42/300aa-11>

7 <https://www.hrsa.gov/sites/default/files/hrsa/vaccine-compensation/data/data-statistics-vicp.pdf>

8 <https://wonder.cdc.gov/controller/datarequest/D8.jsessionid=0286A46410BFA20159115E7D16098E93>

9 <http://www.ctn.state.ct.us/ctnplayer.asp?odID=16908> starting ~ 49:30

10 http://portal.unesco.org/en/ev.php-URL_ID=31058&URL_DO=DO_TOPIC&URL_SECTION=201.html

11 <https://history.nih.gov/research/downloads/nuremberg.pdf>

12 <https://www.utcomchatt.org/docs/biomedethics.pdf>